

1. MATERIAL INSPECTION AND RECEIVING REPORT (DOMESTIC)		2. FLOW CHART OR PROCEDURE NO.		3. SHEET NO. 1	4. NO. OF SHEETS
5. OFFICE ADMINISTERING CONTRACT		6. INSPECTION OFFICE		7. CREDIT VOUCHER OR FILE NO.	
8. AGENCY PLACING ORDER ON SUPPLIER-CITY-STATE <b>United States Government, Washington, D. C.</b>		9. PRIME CONTRACT OR P. O. NO. <b>BB-475</b>		10. NAME OF PRIME CONTRACTOR-CITY-STATE <b>Itak Laboratories, 225 Needham St., Newton, Massachusetts</b>	
11. SUPPLEMENTS AND CHANGE ORDERS		12. MANUFACTURER OR WAREHOUSE SHIPPED FROM-CITY-STATE		13. ORDER NO. ON SUPPLIER	
14. SHIPPED TO-MARK FOR <div style="border: 1px solid black; width: 200px; height: 50px; margin: 10px auto;"></div> <b>STATINTL</b>		15. PROC. DIR. OR REQUISITION NO.		16. SHIPMENT ORDER NO.	
17. SHIPMENT NUMBER ON CONTRACT A. PARTIAL B. FINAL		18. GROSS WEIGHT		19. NET WEIGHT	
(Accountable Offices when different)					
20. DATE SHIPPED <b>1/20/62</b>		21. SEAL NUMBERS		22. BIL OR REGISTRATION NO.	
23. CAR NO.		24. ROUTING			
TRACT ITEM NUMBER 25	STOCK AND/OR PART NUMBER AND DESCRIPTION OF ARTICLES (Indicate no. of shipping containers-Type of container-Container no.) 26		UNIT OF MEAS. 27	QUANTITY SHIPPED 28	QUANTITY RECEIVED 29
UNIT COST 30		TOTAL COST 31			
#1 Five Inch (5") Test Targets  Chargeable to Customer #1  Please pass on to <div style="border: 1px solid black; width: 100px; height: 20px; display: inline-block;"></div>					
Received and Accepted: <div style="border: 1px solid black; width: 150px; height: 40px; display: inline-block;"></div> Authorized Representative		STATINTL		DOCUMENT NO. NO CHANGE IN CLASS. <input type="checkbox"/> <input type="checkbox"/> DECLASSIFIED CLASS. CHANGED TO: TS 65 NEXT REVIEW DATE: 204 AUTH: BR 7-2 REVIEWER: <div style="border: 1px solid black; width: 50px; height: 20px; display: inline-block;"></div> STATINTL	
32. APPROPRIATION		C. ARTICLES SHOWN IN CO. DATE RECEIVED IN APPARENT GOOD CONDITION, EXCEPT AS NOTED DATE: INCHECKER:			
33. INVOICE ROUTING		34. CLASS-CODE		35. ACCOUNT NO.-STORES ACCOUNT	
36. DEBIT VOUCHER OR I. R. NO.					
A. I CERTIFY THAT THE ITEMS LISTED HEREIN HAVE BEEN INSPECTED BY ME OR UNDER MY SUPERVISION. THEY CONFORM TO CONTRACT, AND HAVE BEEN ACCEPTED, EXCEPT AS NOTED.  DATE: SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		B. I CERTIFY THAT I HAVE RECEIVED AND/OR ACCEPTED THE ARTICLES SHOWN HEREIN (For use on Contract No. ) EXCEPT AS NOTED.  DATE:			
(Typed name of Inspector)					

1. MATERIEL INSPECTION AND RECEIVING REPORT (DOMESTIC)		2. FLOW CHART OR PROCEDURE NO.		3. SHEET NO. 1	4. NO. OF SHEETS
5. OFFICE ADMINISTERING CONTRACT		6. INSPECTION OFFICE		7. CREDIT VOUCHER OR FILE NO.	
8. AGENCY PLACING ORDER ON SUPPLIER-CITY-STATE United States Government, Washington, D. C.		9. PRIME CONTRACT OR P. O. NO. BB-475		11. SUPPLEMENTS AND CHANGE ORDERS	
10. NAME OF PRIME CONTRACTOR-CITY-STATE Itck Laboratories, 225 Needham St., Newton, Massachusetts		12. MANUFACTURER OR WAREHOUSE SHIPPED FROM-CITY-STATE		13. ORDER NO. ON SUPPLIER	
14. SHIPPED TO-MARK FOR <div style="border: 1px solid black; width: 200px; height: 100px; margin: 10px auto;"></div> STATINTL		15. PROC. DIR. OR REQUISITION NO.		15. SHIPMENT ORDER NO.	
17. SHIPMENT NUMBER ON CONTRACT A. PARTIAL B. FINAL		18. GROSS WEIGHT		19. NET WEIGHT	
20. DATE SHIPPED 1/19/62					
21. SEAL NUMBERS		22. BIL OR REGISTRATION NO.		23. CAR NO.	
24. ROUTING		25. QUANTITY SHIPPED 28		26. QUANTITY RECEIVED 29	
27. UNIT OF MEAS. 27		28. UNIT COST 30		29. TOTAL COST 31	
STOCK AND/OR PART NUMBER AND DESCRIPTION OF ARTICLES (Indicate no. of shipping containers-Type of container-Container no.)		32. ARTICLES SHOWN IN COLUMN 29 WERE RECEIVED IN APPARENT GOOD CONDITION, EXCEPT AS NOTED		33. DATE: UNCHECKER:	
#1 70mm (Partial) Test Targets  Chargeable to Customer #1  Attachment: Resolving Power Target Array Inspection Report  Please pass on to <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> STATINTL  STATINTL  Received and Accepted: <div style="border: 1px solid black; width: 150px; height: 20px; display: inline-block;"></div> Authorized Representative		34. CLASS-CODE		35. ACCOUNT NO.-STORES ACCOUNT	
36. DEBIT VOUCHER OR I. R. NO.		37. I CERTIFY THAT THE ITEMS LISTED HEREIN HAVE BEEN INSPECTED BY ME OR UNDER MY SUPERVISION. THEY CONFORM TO CONTRACT, AND HAVE BEEN ACCEPTED, EXCEPT AS NOTED.		38. I CERTIFY THAT I HAVE RECEIVED AND/OR ACCEPTED THE ARTICLES SHOWN HEREIN (Up to on Contract No.) EXCEPT AS NOTED.	
DATE		SIGNATURE OF AUTHORIZED GOVERNMENT REPRESENTATIVE		DATE	
(Typed name of Inspector)					

DD FORM 250

PREVIOUS EDITIONS MAY BE USED